13. STATEMENT OF AGENT I, the Undersigned, agent of the above named carrier, certify that the carrier has a lien on the above named carrier.		14. NAME AND ADDRESS OF LIE	NHOLDER
12. AMOUNTS A. Freight CLAIMED	B. Charges	C. Contributions to General Averag	
5. WANTO AND NOWBERO	IU. NO. OF PACKAGES	11.	KLWARKS
9. MARKS AND NUMBERS	10. NO. OF PACKAGES	44	REMARKS
8. LOCATION OF GOODS			
LIEN NOTICE 19 U.S.C. 66, 1564; 19 CFR 141.112 5. NAME OF CONSIGNEE/IMPORTER		6. NAME OF CARRIER	7. B/L NO. OR CBP 7512 NO.
		3. DATE OF NOTICE	4. DATE OF ARRIVAL
U.S. DEPARTMENT OF HOMELAND SECURITY Bureau of Customs and Border Protection		1. PORT	2. CBP ASSIGNED NO.
			Form Approved OMB No. 1651-0012

It the Ordersgreed, agent of the above harned carrier, certify that the Carrier has a lien of the above listed merchandise in accordance with Sections 564 and 613 of the Tariff Act of 1930. I further certify that the information set forth in this notice is true to the best of my knowledge and belief, and that the sum claimed is due and unpaid and was a subsisting lien upon the goods described at the time they passed into Bureau of Customs and Border Protection (CBP) custody. I understand that sale of this merchandise by the Government for any reason does not entitle claimants to advance notice in the absence of a written request identifying the goods with this notice. I also, agree, upon the discharge or satisfaction of this lien, to promptly notify the CBP office at the above-named port by filing a written release or receipt showing payment of the claim in full.

SIGNATURE OF AGENT

15. SIGNATURE AND TITLE OF LEINHOLDER

Date

16. STATEMENT OF CLAIMANT The amounts claimed as due and unpaid have been satisfied.

SIGNATURE OF CLAIMANT Date

DISPOSITION (CBP Use Only)

Date

17. NAME OF CBP OFFICER 18. SIGNATURE OF CBP OFFICER 19. DATE

PAPERWORK REDUCTION ACT NOTICE: The Paperwork Reduction Act says we must tell you why we are collecting this information, how we will use it, and whether you have to give it to us. Your response is mandatory. The estimated average burden associated with this collection of information is 5 minutes per respondent or recordkeeper depending on individual circumstances. Comments concerning the accuracy of this burden estimate and suggestions for reducing this burden should be directed to Bureau of Customs and Border Protection, Information Services Branch, Washington, DC 20229, and to the Office of Management and Budget, Paperwork Reduction Project (1651-0012), Washington, DC 20503.